

ISSUE SLIP STAPLE AREA (for additional forms references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		14	4/6
FORMALITY REVIEW	EP	1027	04/27/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

C.C.
0430-01

If more than 150 claims or 10 actions
staple additional sheet here

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